

Town Hall: Utah County's Response to the Opiate Crisis

Utah County Commissioners

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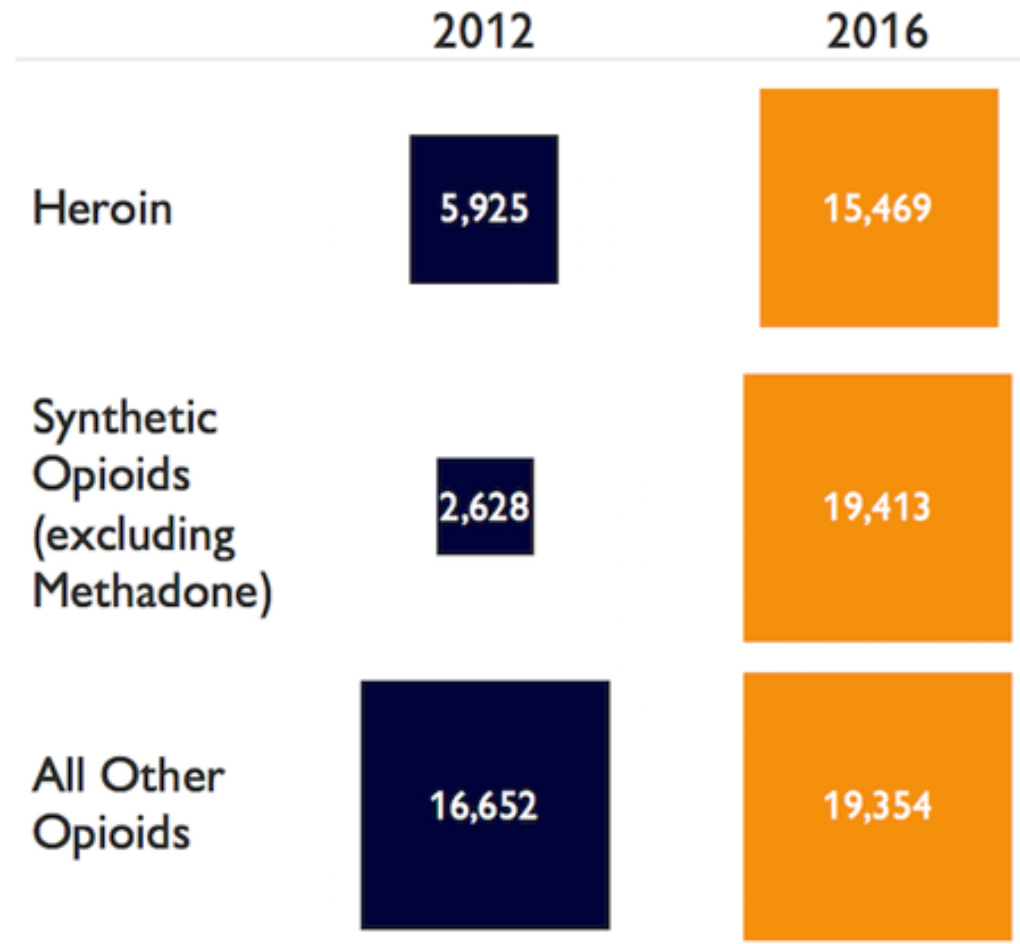
Tonight's Meeting...

- ▶ Introductions
- ▶ How much of a problem do we have?
- ▶ National, State, County and City solutions already in place.
- ▶ National, State, County and City initiatives recently started.
- ▶ Utah County and Provo City initiatives under consideration.
- ▶ What some other states and counties are doing.
- ▶ What else should we consider?

How Much of a Problem Does Utah County Have?

- ▶ 1 in 5 adults nationally knows someone who has been addicted to opiates
- ▶ 75% of heroin addicts started on legitimately prescribed prescription opiates
- ▶ Utah has ranked as high as 6th nationally in opiate overdose deaths in the past few years.
- ▶ Utah ranks #1 in the number of pregnant women prescribed opiates.
- ▶ Neonatal abstinence syndrome cost the state of Ohio \$70 million in 2015 - mostly for Medicaid treatment of newborns whose mothers abused opiates.
- ▶ *More Americans died from opiate overdose in 2016 than were killed in all of the Vietnam War.*

National Opiate Overdose Deaths 2012 v 2016



Rate of Drug Poisoning Deaths per 100,000 Population, Utah 1999-2016

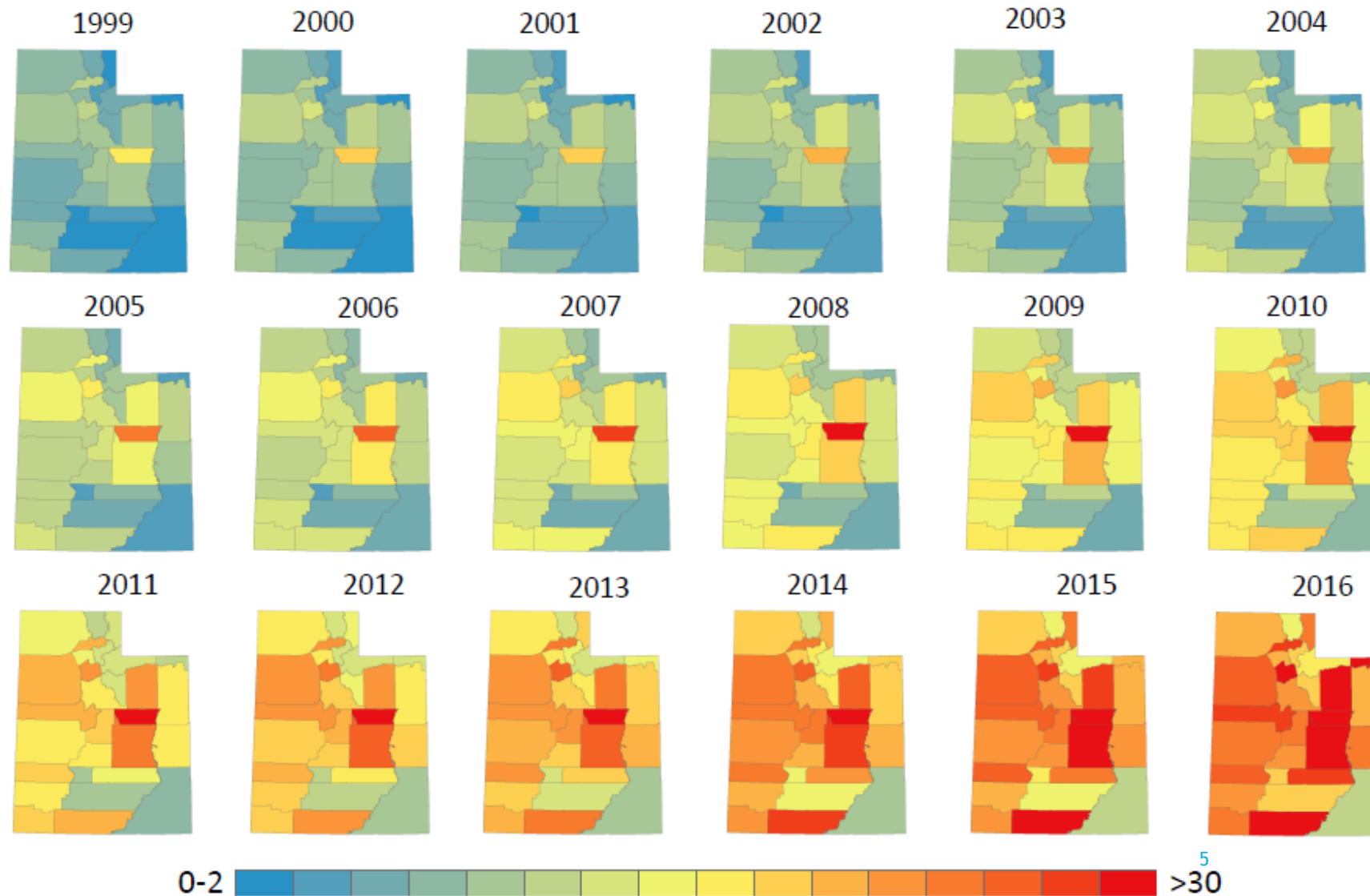
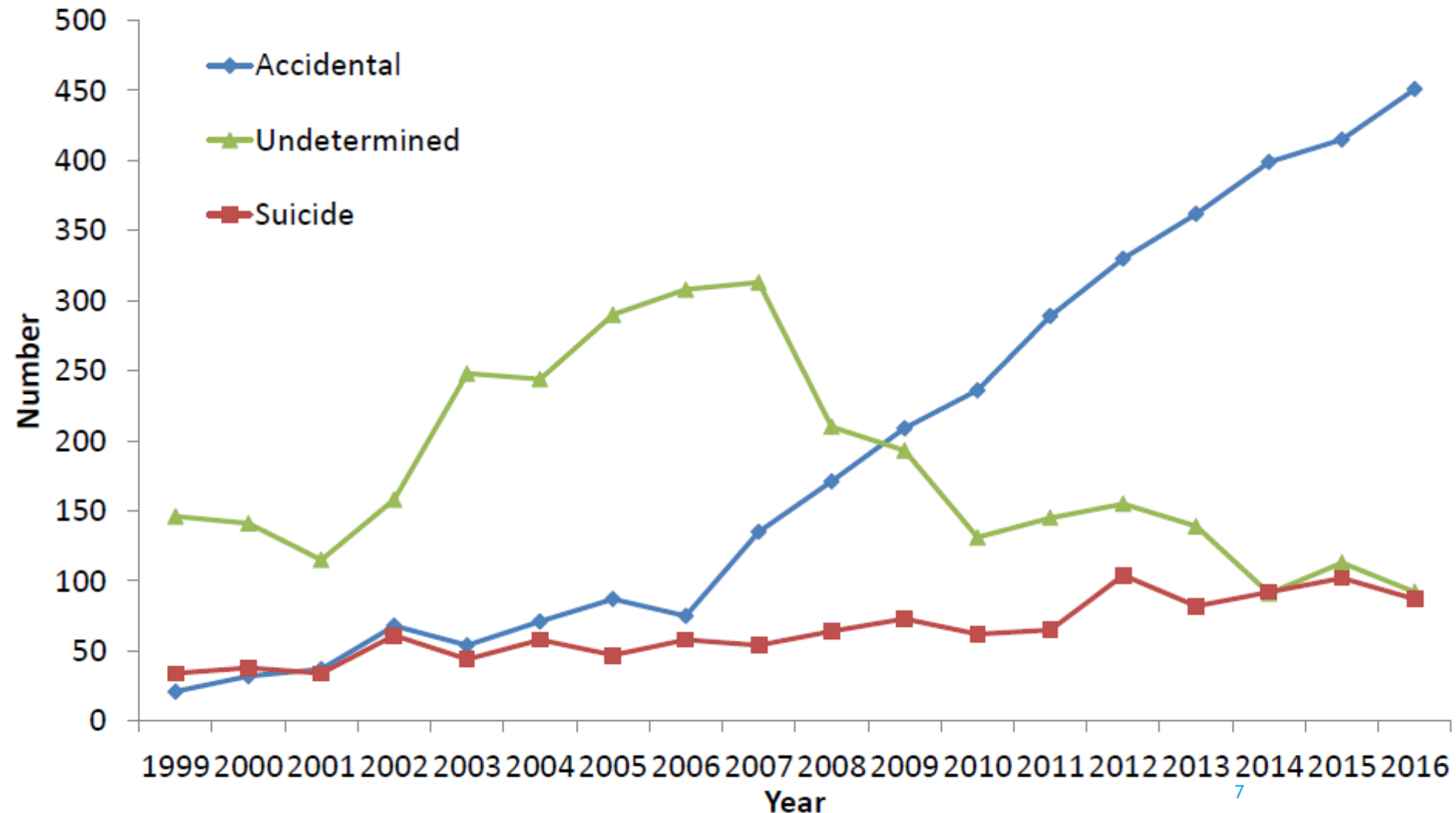


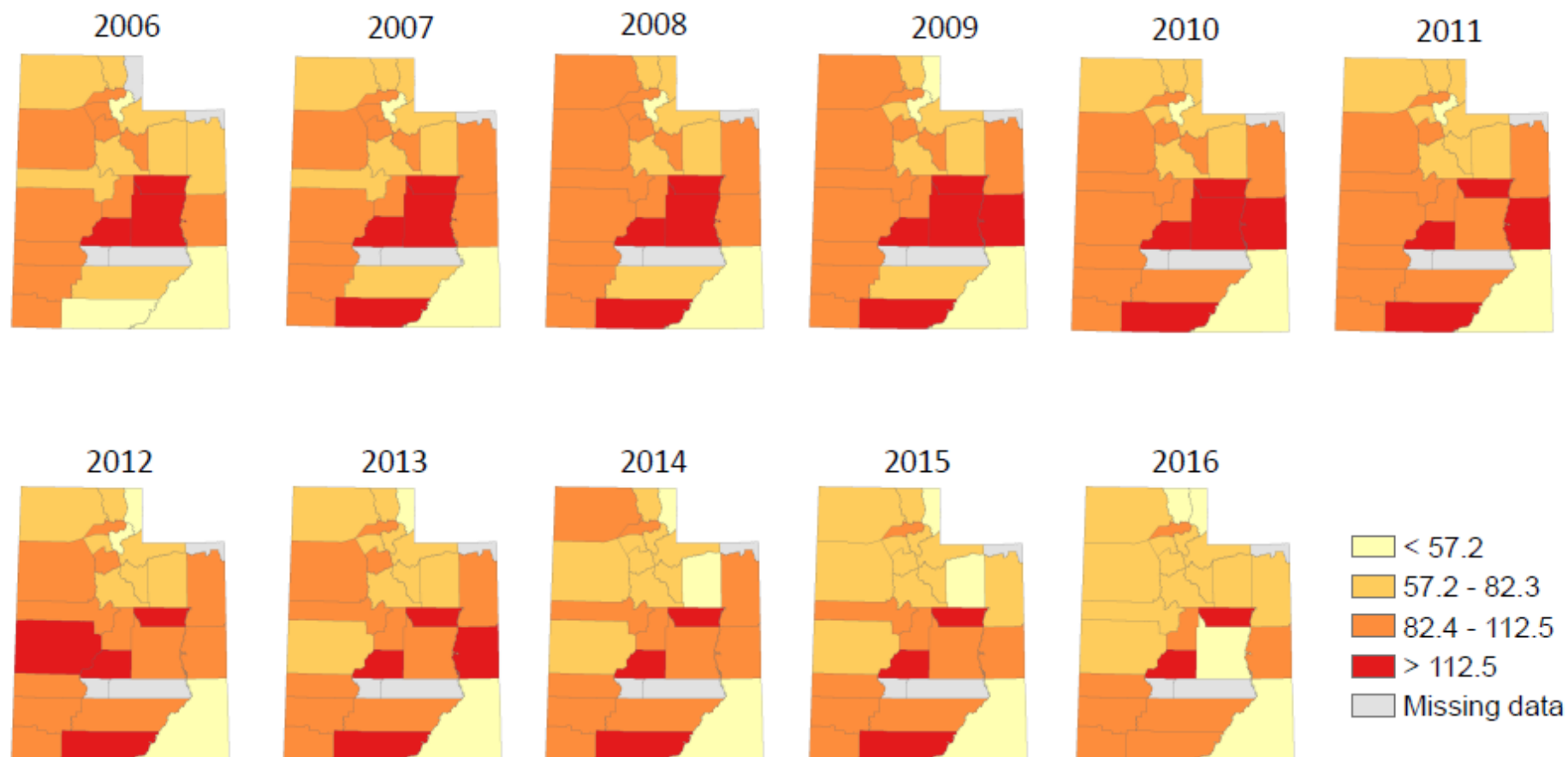
Table 2. Opioid Deaths and ED Encounters by Small Area from Highest Rates to Lowest

Small Area	<u>Opioid Deaths</u>		Small Area	<u>ED Encounters</u>	
	2014-2015 Number	Rate per 100,000		2013-2014 Number	Rate per 100,000
10_50 Utah Co (South)	17	27.68	10_50 Utah Co (South)	64	92.3
10_49 Springville/Spanish Fork	38	26.26	10_43 Pleasant Grove/Lindon	83	81.9
10_42 American Fork/Alpine	26	25.74	10_49 Springville/Spanish Fork	126	79.1
10_48 Provo (South)	20	22.59	10_48 Provo (South)	76	72
State	1213	22.29	10_44 Orem (North)	46	70.2
Utah County	179	19.33	10_45 Orem (West)	41	65.1
10_44 Orem (North)	13	19.29	Utah County	623	62.1
10_46 Orem (East)	7	17.59	State	3458	62.1
10_45 Orem (West)	8	15.24	10_42 American Fork/Alpine	59	60.6
10_41 Lehi/Cedar Valley	28	14.26	10_41 Lehi/Cedar Valley	79	48.1
10_43 Pleasant Grove/Lindon	12	13.61	10_46 Orem (East)	19	44
10_47 Provo (North)/BYU	7	12.2	10_47 Provo (North)/BYU	30	39.6

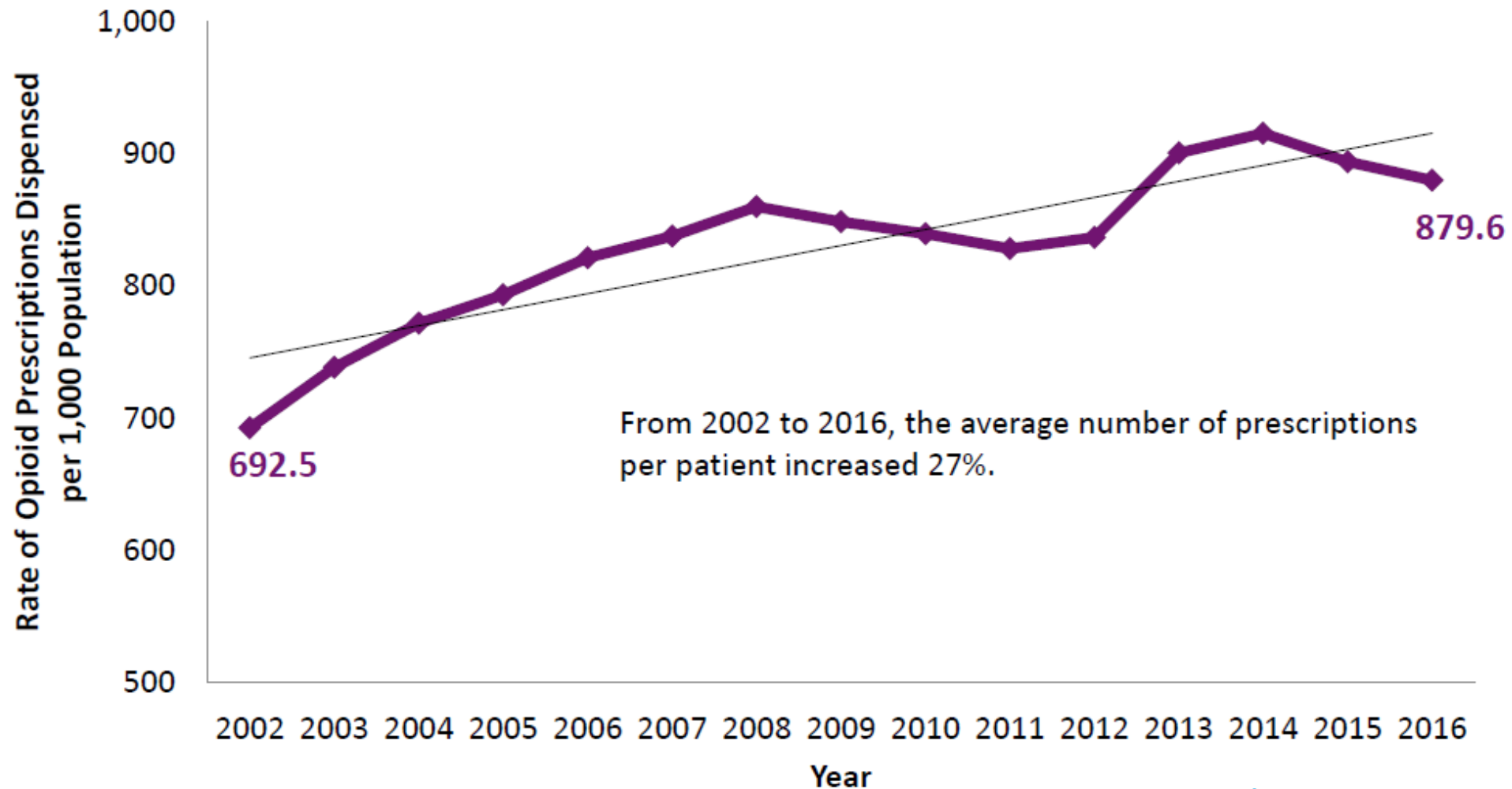
Number of drug overdose deaths by manner of death, Utah, 2000-2016



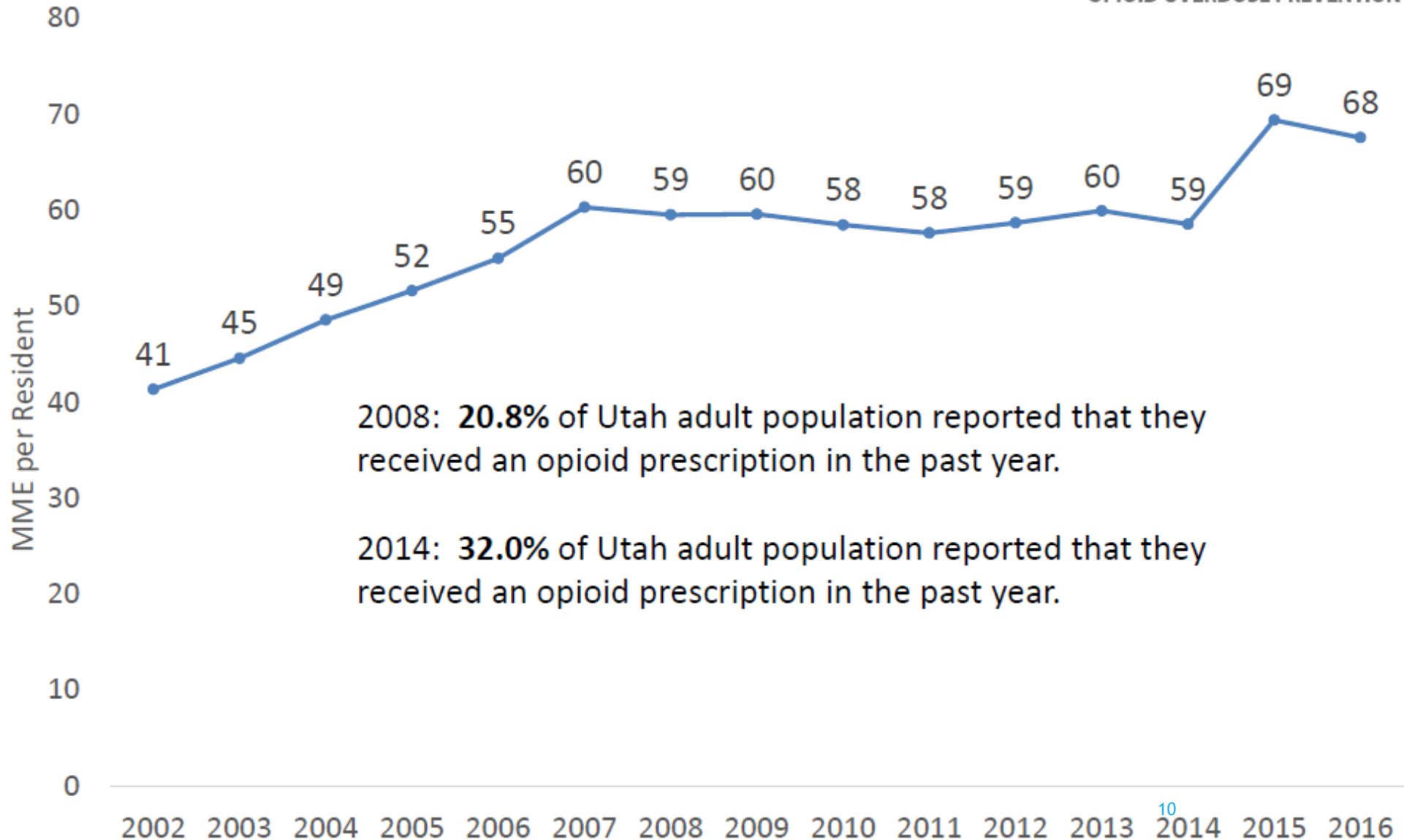
Opioid prescriptions dispensed per 100 population, Utah 2006-2016



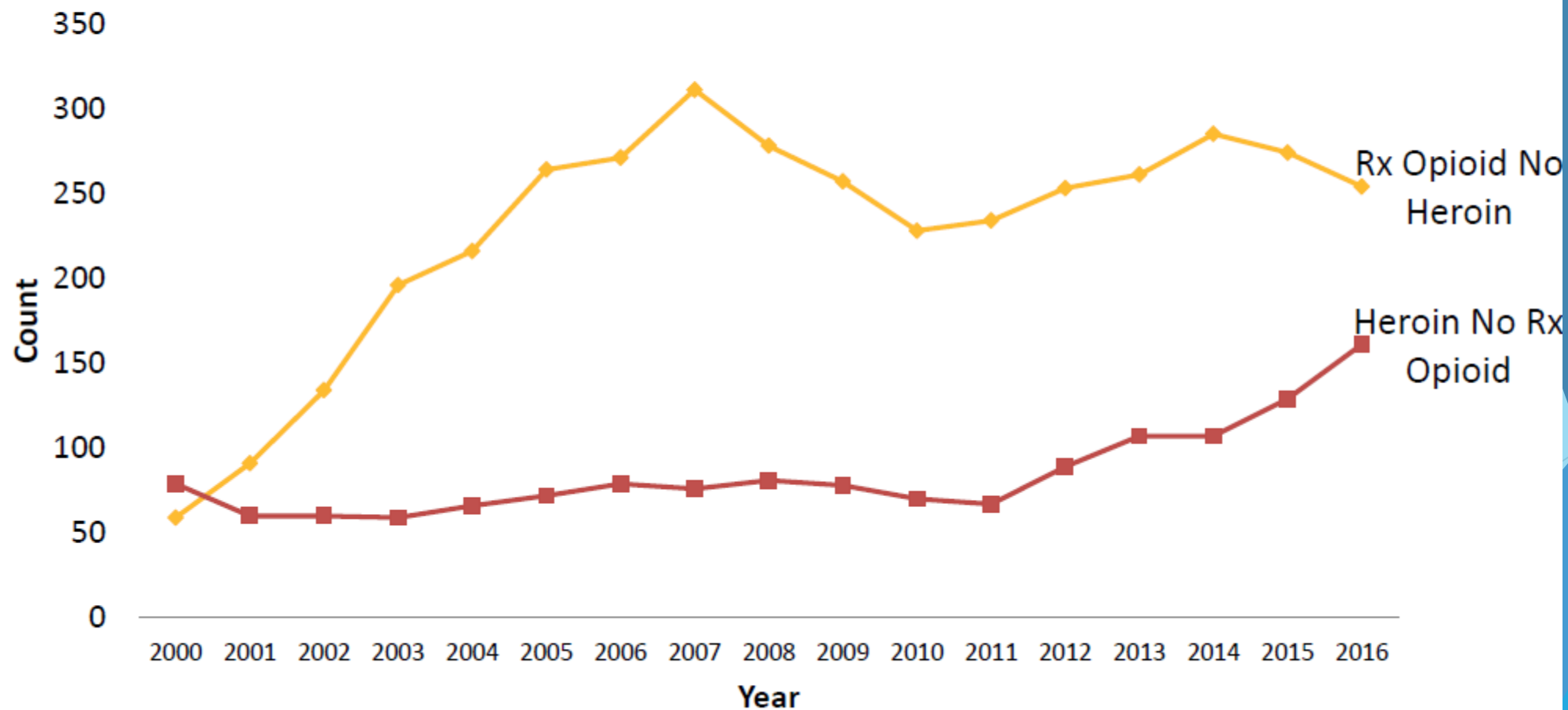
Rate of Opioid Prescriptions Dispensed per 1,000 Population, Utah 2002-2016



Average MME per Resident, Utah 2002-2016



Number of occurrent opioid deaths by year and drug type, Utah, 2000-2016



However...

- ▶ Opiate medications themselves are not evil.
- ▶ 95% of people prescribed opiates never develop abuse and addiction.
- ▶ It is un-Christian to vilify our friends and neighbors
- ▶ Long term opiate treatment for chronic medical conditions is safe.
- ▶ Avoid knee-jerk reactions

National, State, County and City Solutions Already in Place

National Solutions in Place

- ▶ Substance Abuse Prevention and Treatment Block Grant funds the majority of public sector treatment combined with state and county dollars.
- ▶ 21st Century Cures Act and the Comprehensive Addiction Recovery Act (CARA) passed by Congress to fund increases in treatment - specifically for opiate abusing/addicted Americans. (\$1.6 billion over two years)
- ▶ National Health Service Corps student loan reimbursement program expanded to include addictions services clinicians for the first time.

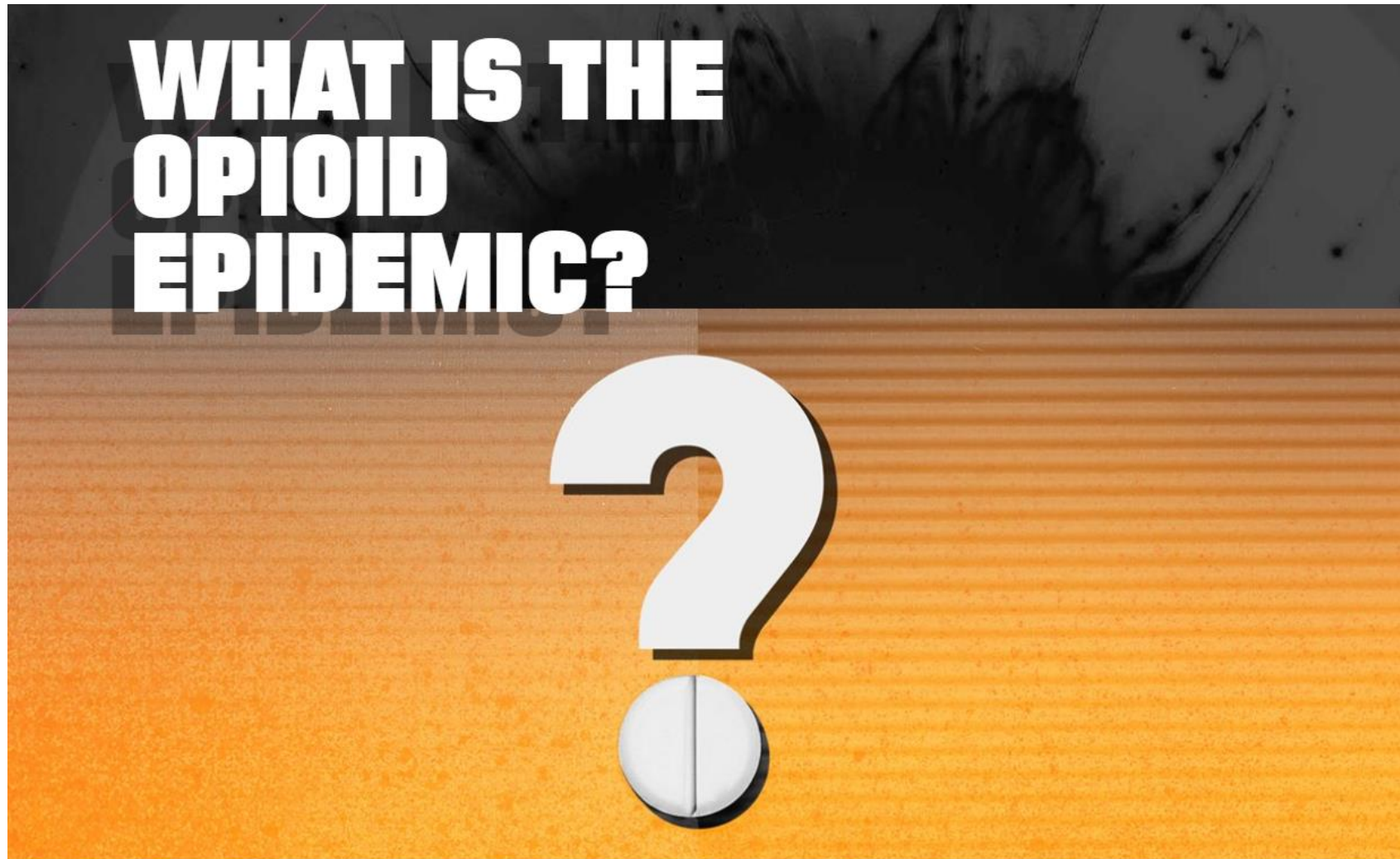
Comprehensive Addiction and Recovery Act (CARA)

On July 22, 2016, President Obama signed the Comprehensive Addiction and Recovery Act (CARA), into law. CARA aims to address the national epidemic of opioid addiction by creating and expanding federal grant programs to:

- Temporarily expand eligibility to prescribe buprenorphine-based drugs for MAT for substance use disorders to qualifying nurse practitioners and physician assistants, through October 1, 2021;
- Expand access to opioid overdose reversal drugs, by supporting the purchase and distribution of such medications and training for first responders;
- Increase awareness and educate the public regarding the misuse of prescription opioids;
- Reauthorize the National All Schedules Prescription Electronic Reporting (NASPER) Act, which provides grants to states to support and improve interoperability of PDMPs;
- Authorize Medicare prescription drug plans to develop a safe prescribing and dispensing program for beneficiaries that are at risk of misuse or diversion of drugs that are frequently abused or diverted;
- Create a comprehensive program at U.S. Department of Justice to improve efforts by law enforcement and the criminal justice system to address substance use disorders; and
- Establish an HHS-led task force to consolidate federal best practices for pain management.

These measures are important steps for reducing the impact of prescription drug misuse on America's communities by preventing and responding to opioid addiction. However, given the large number of Americans with untreated or inadequately treated opioid use disorders and the current scarcity of treatment resources, there is concern that the lack of funding for the bill will prevent this new law from having a substantial impact on the nation's ongoing opioid epidemic.

Office of National Drug Control Policy Web
Page: <https://opioids.thetruth.com>



State Solutions in Place

- ▶ Prescription Drug Monitoring Program through Department of Commerce
- ▶ The Rio Grande project in Salt Lake extended Medicaid coverage for drug and alcohol treatment to an additional 11,000 persons homeless or involved with the criminal justice system.
- ▶ State Treatment Response grant administering the federal 21st Century Cures funding.

What Utah County Does

- ❖ Coalition Work
- ❖ Public Awareness
- ❖ Healthcare Providers
- ❖ Overdose Prevention Education
- ❖ Access to Naloxone
- ❖ Proper Drug Disposal
- ❖ Access to Treatment
- ❖ Policy Work

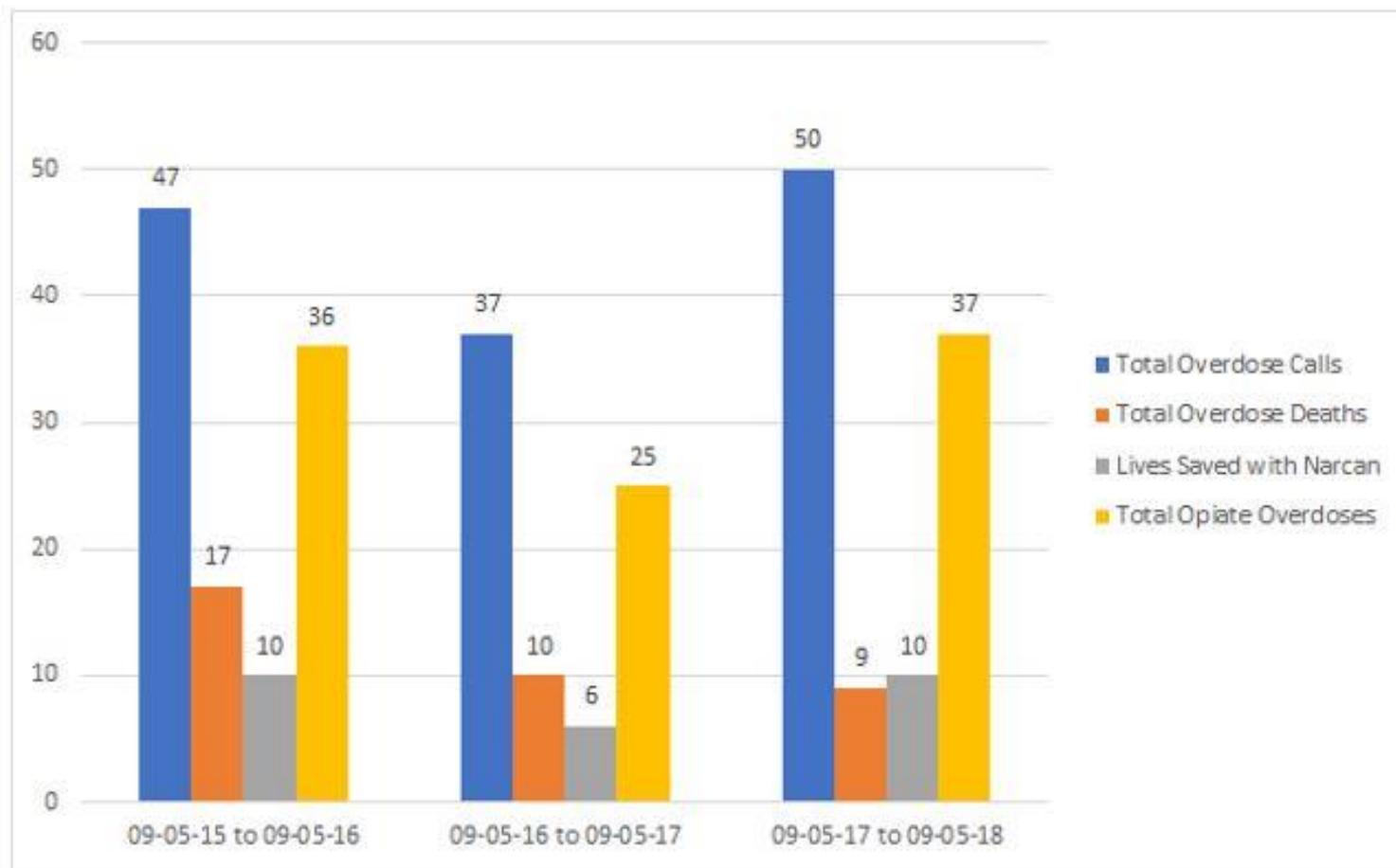
What Provo City Does

- ❖ First Responder
Training

- ❖ Equipping First
Responders with
Naloxone

- ❖ Public Awareness

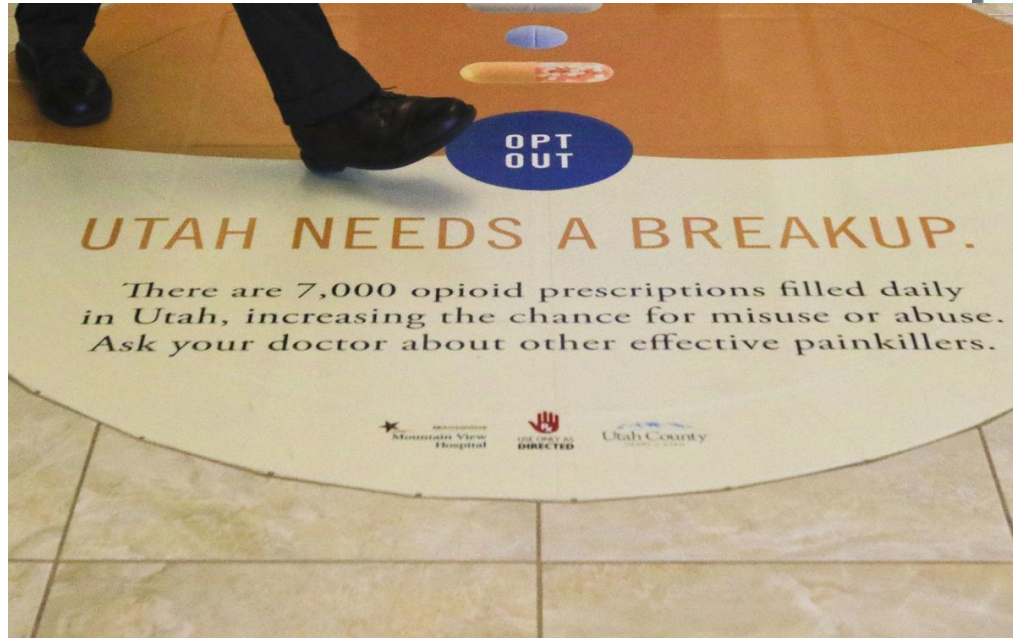
- ❖ Proper Drug
Disposal (Drop
Boxes)



Total Heroin seized by UCMC since 2015 is 213.1 pounds

What Utah County Government Does Now

- ▶ Use Only As Directed Campaign





USE ONLY AS
DIRECTED

The Problem

Speak Out

Opt Out

Throw Out

Opioid Safety

Resources

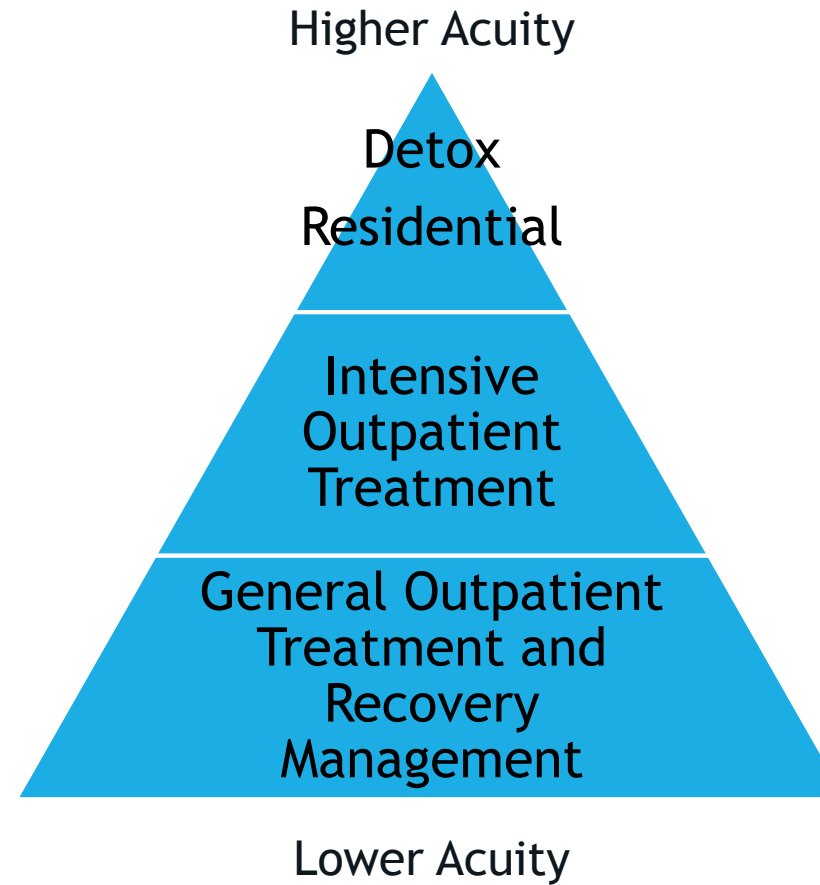
**NOT ALL #FAILS
NEED OPIOIDS.
DON'T ADD
ADDICTION TO
INJURY.**



Utah County Drug and Alcohol Continuum of Care

▶ Level of Care	Length of Stay
▶ Detox	3-10 Days
▶ Long Term Residential	90-120 Days
▶ Short Term Residential	30-45 Days
▶ Intensive Outpt	90-180 Days
▶ Jail (IOP level)	90 Days
▶ Methadone	Indeterminate
▶ General Outpt	90-180 Days
▶ Medication Mgt	Indeterminate
▶ Recovery Mgt	Indeterminate

(clients may start at any level of care and transfer up or down depending on progress in treatment)



Household Hazardous Waste Prescription Drug Takeback Events





7TH ANNUAL
2018 UTAH VALLEY UNIVERSITY
CONFERENCE ON
ADDICTION

MARCH 9, 2018 | 9 AM - 4 PM



MARCH 9, 2018

[REGISTER](#)

State Public Policy

▶ 2017

- ▶ HCR 4 - Concurrent Resolution Declaring Drug Overdose Deaths to Be a Public Health Emergency)
- ▶ HB 240 - Opiate Overdose Response Act -- Standing Orders and Other Amendments
- ▶ HB 192 - Opiate Overdose Response Act -- Pilot Program and Other Amendments
- ▶ HB 238 - Opiate Overdose Response Act -- Overdose Outreach Providers and Other Amendments
- ▶ HB 239 - Access to Opioid Prescription Information via Practitioner Data Management Systems
- ▶ HB 286 - Essential Treatment and Intervention Act (Commit to treat by family)
- ▶ HB 175 - Opiate Abuse Prevention and Treatment Amendments (clean needle)

What Utah County Government Does Now

- ▶ Utah County has addiction medicine expertise that we share with rural and frontier areas of the state with a shortage of providers.
- ▶ Utah County's Drug and Alcohol Prevention staff have provided Naloxone overdose reversal training to over 500 people in 30 training events so far, and distributed over 150 Naloxone kits.
- ▶ Utah County's addiction medicine doctor is collaborating with the Utah County Jail medical staff to provide MAT for pregnant inmates, continue that care after release from jail, and coordinate care with the inmate's OB-GYN.

State Public Policy

▶ 2018

- ▶ HB 127, Controlled Substance Database Act Amendments
- ▶ HB 158, Controlled Substance Database Revisions
- ▶ HB 195, Medical Cannabis Policy (Right to try)
- ▶ HB 399, Opioid Abuse Prevention and Treatment Amendments
- ▶ HJR 12, Joint Resolution Calling upon the Atty Genl to Sue Rx Opiate Manuf.
- ▶ SB 85, Controlled Substance Disposal Amendments
- ▶ SCR 4, Concurrent Resolution on Deaths form Opioid Induced Postoperative Respiratory Depression

HB 127 provisions: Prescription Drug Monitoring Program

- ▶ As amended, the requirements are:
 - ▶ “A prescriber shall check the database for information about a patient before the first time the prescriber gives a prescription to a patient for a Schedule II opioid or a Schedule III opioid”; and
 - ▶ "If a prescriber is repeatedly prescribing a Schedule II opioid or Schedule III opioid to a patient, the prescriber shall periodically review information about the patient in the database or other similar records of controlled substances the patient has filled."
- ▶ In addition, the bill states that DOPL shall offer education to a prescriber who has a pattern of prescribing opioids not in accordance with CDC Clinical Guidelines for Prescribing Opioids for Chronic Pain or the Utah Clinical Guidelines on Prescribing Opioids for Treatment of Pain.

Awareness and Advocacy Work with our Congressional Delegation



Awareness and Advocacy Work with our Congressional Delegation

- ▶ Substance Use disorder Workforce Loan Repayment Act (S.2524)
- ▶ Strengthening the Addiction Treatment Workforce Act (S.1453 and H.R. 5102)
- ▶ Comprehensive Addiction and Recovery Act (CARA 2.0) (S. 2456 and H.R. 5311)
- ▶ Congressman Curtis' POPPY Study Act (H.R. 5646)
- ▶ 21st Century Cures Act (Utah STR funding)

What Utah County Government Does Now

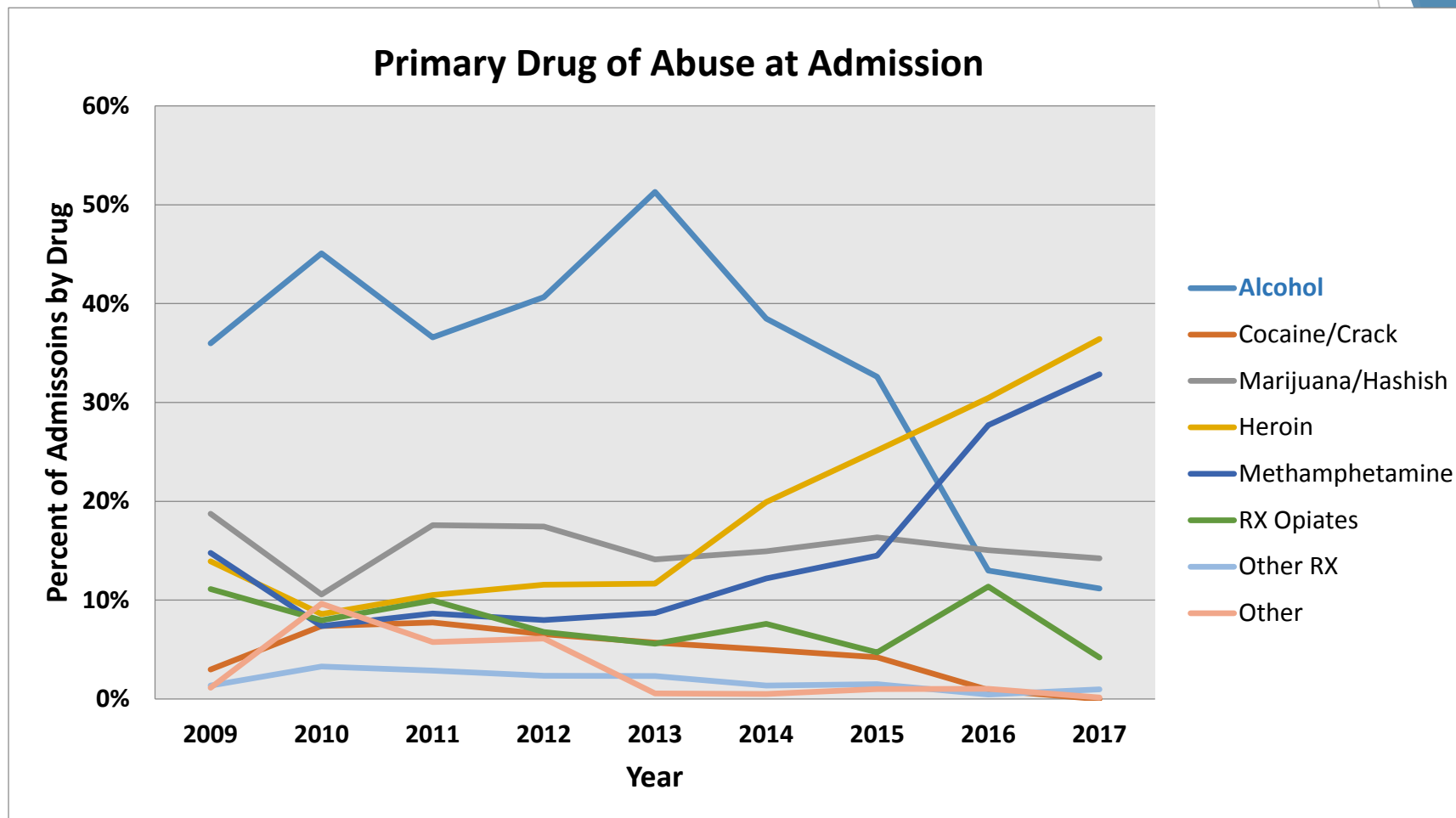
- ▶ In Partnership with 4th District Court and 4th District Juvenile Court - provides prosecution, defense, therapy, case management, and medication assisted treatment in two felony and four family drug court programs.
- ▶ We treat nearly 2000 uninsured and Medicaid eligible people per year - over 40% with opiate abuse or dependence.
- ▶ Including medication assisted treatment for over 500.
- ▶ Screening for drug, alcohol, and mental health problems for jail inmates.
- ▶ OUT+ treatment program in the jail.
- ▶ UCAP alternative probation program for low level offenders. (Over ¼ of UCAP clients have an opiate use disorder.)
- ▶ Prescription Drug Takeback Events.

National, State, County and City Initiatives Under Consideration or Recently Started

Utah County Lawsuit Against Opiate Manufacturers, Marketers, Distributors

- ▶ Resolution introduced by Commissioner Lee in November, 2017 to pursue legal action.
- ▶ Utah County is announcing, through these town hall meetings, that it is filing suit against the Opiate Manufacturers, Marketers, Distributors who have misled the consumer and physicians about the safety and addiction risk of their medications.

Utah County Drug Treatment Admissions



A Prescription for Action

Local Leadership in Ending the Opioid Crisis

A Joint Report From

NLC NATIONAL
LEAGUE
OF CITIES



Recommendations at a Glance

City and county leaders must assume roles of leadership in local efforts to reverse the trends of the opioid crisis.

1. Set the tone in the local conversation on opioids.
2. Convene community leaders.
3. Foster regional cooperation.
4. Educate and advocate to state and federal partners.
5. Ensure progress for all in formulating responses to addiction.

Utah County initiatives Under Consideration

Recommendations from the Surgeon General's Report

► Time for a Change

- It is time to change how we as a society address alcohol and drug misuse and substance use disorders. A national opioid overdose epidemic has captured the attention of the public as well as federal, state, local, and tribal leaders across the country.
- Substance misuse and substance use disorders are estimated to cost society \$442 billion each year in health care costs, lost productivity, and criminal justice costs. (\$1351/person or \$5404/family of 4 per year)
- Studies show that every dollar spent on substance use disorder treatment saves \$4 in health care costs and \$7 in criminal justice costs.

Initiatives Under Consideration

- ▶ Continuation of Care with Medication Assisted Treatment for individuals initiated on buprenorphine in hospital emergency departments
- ▶ Naloxone provided to inmates and their families upon release from jail
- ▶ Screening, Brief Intervention and Referral to Treatment training for opiate prescribers
- ▶ Increased Prescription Drug Drop Boxes at all retail pharmacies.
- ▶ Others....

What Federal, State, Local, and Tribal Governments Can Do

- ▶ Provider leadership, guidance, and vision in supporting a science-based approach to addressing substance use-related health issues.
 - ▶ Improve public education and awareness
 - ▶ Monitor public health trends
 - ▶ Provide incentives, funding, and assistance to promote effective prevention, treatment, policies and programs
 - ▶ Address legislative and regulatory barriers
 - ▶ Improve coordination between healthcare, criminal justice, and social service organizations
 - ▶ Foster collaborative initiatives with the private sector

What some other States and Counties Are Doing

What some other States and Counties are doing

- ▶ Lawsuits against opioid manufacturers, marketers, and distributors.
- ▶ Opioid Community Collaborative partnership between Davis Behavioral Health, Weber Human Services, and IHC to provide medication assisted treatment to individuals abusing RX opiates.
- ▶ Carbon and Emery Counties opened a methadone program for the first time.
- ▶ Medication Assisted Treatment in jails and prisons for opiate abusing inmates (mostly on the east coast and Appalachia.)

What Should Utah County Do?